Request to Walk Out-Of-Term in Commencement

This form is for advanced-degree candidates only. Only graduate students who wish to apply to participate out-of-term (i.e., “walk” in a commencement ceremony at a time other than the term in which all requirements have been met) can submit this form.

**Note:** Undergraduate degree candidates who request to participate out-of-term should contact their college dean’s office and, if approved, obtain a letter to provide to the UF Bookstore to permit regalia orders.

**Instructions:** Print, complete and submit this form to your college dean’s office **no sooner than** the first week of the term of the ceremony. Approval must be granted and the Director of Commencement must receive notification of the approval **no later than** three weekdays before the ceremony.

**Student:** Complete and sign

| Name: __________________________ | UFID: __________________________ |
| College: __________________________ | Department: __________________________ | Degree Level: __________________________ |
| Email Address: __________________________ | Phone Number: (____) __________________________ |
| Scheduled term of graduation: Year:_______ | Spring __ / Summer __ / Fall __ |
| Requested term to walk: Year:_______ | Spring __ / Summer __ / Fall __ |

Reason(s) for requesting to participate out-of-term (attach additional page if necessary):

- I understand that I will be recognized at the commencement ceremony, but my name will not appear in the commencement program. My name will be included in the program during the term all my degree requirements are satisfied.
- I understand that I am responsible for following all graduation instructions listed on the UF commencement website (https://commencement.ufl.edu/).

Student’s Signature __________________________ Date ____________

**Dean’s Office to complete and sign (must be signed by a Dean before submitting to commencement office)**

Check one and specify reason(s):
- [ ] I **approve** the student to participate in the requested commencement ceremony for the following reason(s):
- [ ] I **do not approve** the student to participate in the requested commencement ceremony for the following reason(s):

Signature __________________________ Title __________________________ College __________________________ Date ____________

**Send completed form to**
Stephanie McBride, Director of Commencements, Office of the Provost, 235 Tigert Hall, stephmcbride@aa.ufl.edu, 352-392-5277